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OFFICE OF THE MAYOR



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MEMORANDUM

TO: Members of the North Little Rock City Council
FROM: Glinda Craigmyle *GC*
DATE: May 24, 2016
SUBJECT: Alcoholic Beverages Permit Request

For your information, I have enclosed a copy of the *Assignment and Comments of Officials* form from the State of Arkansas, Alcoholic Beverage Control Division.

The following applicant has applied for an off premises retail beer permit with a replacement from Saed Qatourn:

Jawed Arab
Eureka Garden Food Mart
124 Eureka Garden Rd.
North Little Rock, AR

Please note the 15 day comment period referred to in the final paragraph of the *Comment* page.

Thank you.

Attachments

FILED _____ A.M. 3:15 P.M.
BY Glinda-Mayor's Office
DATE 5-24-16
Diane Whitbey, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by S. L. Serry

ASSIGNMENT

D6:003-D6L013



Date Received: 05/11/2016

Date Assigned: 05/18/2016

Applicant: JAWED ARAB

D.O.B: 12/02/1947

Green Card Number (Permanent Resident Alien):

Home Address: 2501 Riverfront Drive Apt #E-103, Little Rock, AR, 72202

Home Phone:

Business Phone :

Cell Phone: 845-825-6678

Trade Name: EUREKA GARDEN FOOD MART

Former Trade Name: HANDI PANTRY FOOD

Business Address : 124 Eureka Garden Road, North Little Rock **County** Pulaski

Type Of Investigation: Retail Beer off Premises - Replacement from Saed Qatoum #05796

Dancing, if requested:

Comments / Remarks :

**Copies Of Assignment and
Comment Form Mailed to:**

Mayor Patrick H. Hays & City Council
Danny Bradley, Chief of Police
Sheriff Charles "Doc" Holladay
Mr. Larry Jegley

Assigned to Investigator: _____

**Stockholders / Partners / LLC
Members:**

ALCOHOLIC BEVERAGE CONTROL DIVISION
COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: JAWED ARAB

TYPE OF APPLICATION: Retail Beer off Premises - Replacement from Saed Qatoum

BUSINESS NAME: EUREKA GARDEN FOOD MART

BUSINESS ADDRESS: 124 Eureka Garden Road, North Little Rock, AR, 72117

DATE OF APPLICATION: 05/11/2016

NAME OF PUBLIC OFFICIAL: _____

TITLE OF OFFICIAL: _____

OFFICIAL MAILING ADDRESS: _____

PHONE : _____

SIGNATURE OF OFFICIAL: _____ DATE: _____

NAME OF AGENCY OR COURT: _____

Do you have any objections to the issuance of this permit? _____

(Yes or No)

If yes, please explain your objections below:

To ensure your comments are available at the time this application is considered by the Director, please complete and return this form to ABC Administration, 1515 West 7th Street, Suite 503, Little Rock, AR 72201, within fifteen (15) days of receipt. In compliance with the Freedom of Information Act, this Comment Form will become a matter of public record. **Pursuant to ACA 3-2-103, a national fingerprint based background check will be, or has been, conducted. At ACICs request, do not run your own criminal history check through ACIC.**

100%
100%
100%
100%
100%



STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION
APPLICATION FOR RETAIL BEER PERMIT

Check One: () ON PREMISES CONSUMPTION
(X) OFF PREMISES CONSUMPTION

New Application
Replacement ☒
Permit No. 05796

Repl. from Saed QATOOM

I, or we, do hereby make application to the State of Arkansas for a permit to sell beer at retail, and do hereby submit answers to the following questions under oath for your approval:

Eureka Garden Food Mart LLC FEIN# 81-2488497
Corporate /Partnership/LLC Name

NAME JAWED — ARAB
First Middle Last

HOME ADDRESS 2501 Riverfront Dr. E-103, Little Rock 72202 Pulaski
Street City Zip County

BUSINESS NAME EUREKA GARDEN FOODMART LLC FORMER NAME —

BUSINESS ADDRESS 124 Eureka Garden Rd, N. Little Rock 72117
Street City Zip County Township

Is proposed location inside or outside city limits? INSIDE

Is the beer to be sold in connection with any other business? NO (A) If so, state type of business
(café, drug store, pool hall, service station, convenience store, etc.) —

(B) If beer is to be sold in connection with a motor fuel sales business give number of gasoline and/or diesel pumps at each location: —

Are you the owner of the proposed premises? NO Do you have the premises leased? YES

If leased, give name and address of owner ARA PROPERTIES LLC, 17500 COLONEL GLEN RD, LITTLE ROCK AR-72210

Will there be dancing on the premises? NO Dance Space —

Does anyone now hold a beer or any other permit at this location? YES If so, give name and permit number(s) Handi Pantry Food Inc 0000003623

Has anyone, to your knowledge, held a beer or any other permit at this location? NO If so, give name and permit number(s) —

Do you or any other person interested in this permit hold any other type alcoholic beverage permit? NO

If held, give name, place and permit number(s) —

RECEIVED

RECEIVED